



Senate

General Assembly

File No. 246

January Session, 2013

Substitute Senate Bill No. 652

Senate, March 28, 2013

The Committee on Children reported through SEN. BARTOLOMEO of the 13th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

AN ACT CONCERNING REFERRALS FROM THE DEPARTMENT OF CHILDREN AND FAMILIES TO THE BIRTH-TO-THREE PROGRAM.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective October 1, 2013*) (a) The Department of
2 Children and Families shall, within available appropriations, establish
3 a program to address the developmental needs of children thirty-six
4 months of age or younger who are substantiated as victims of abuse or
5 neglect or have been the subject of an assessment pursuant to the
6 differential response program, established under section 17a-101g of
7 the general statutes.

8 (b) As part of such program, the department shall screen such
9 children for developmental and social-emotional delays utilizing
10 evidence-based assessments, including, but not limited to, physical
11 examinations, social and emotional evaluations and questionnaires.
12 The department shall conduct such screening twice annually. The
13 department shall refer any child exhibiting developmental or social-

14 emotional delays pursuant to such screening to the birth-to-three
 15 program, established under section 17a-248b of the general statutes.
 16 The department shall refer any child who is not found eligible for
 17 services under the birth-to-three program to the Help Me Grow
 18 prevention program of the Children's Trust Fund, or a similar program
 19 which the department deems appropriate.

20 (c) Not later than July 1, 2014, and annually thereafter, the
 21 department, in accordance with the provisions of section 11-4a of the
 22 general statutes, shall submit a report to the joint standing committee
 23 of the General Assembly having cognizance of matters relating to
 24 children for inclusion in the annual report card prepared pursuant to
 25 section 2-53m of the general statutes on the status of the program
 26 authorized pursuant to subsection (a) of this section. Such report shall
 27 include: (1) The number of children thirty-six months of age or
 28 younger within the state who are victims of substantiated abuse or
 29 neglect; (2) the number of children thirty-six months of age or younger
 30 within the state who are being served through the differential response
 31 program established under section 17a-101g of the general statutes; (3)
 32 the percentage of children who received evidence-based assessments
 33 for developmental and social-emotional delays by the department or
 34 by a provider contracted by the department within the preceding
 35 twelve months; and (4) the percentage of children receiving evidence-
 36 based developmental support services through the birth-to-three
 37 program established under section 17a-248b of the general statutes or
 38 through a provider contracted by the department.

This act shall take effect as follows and shall amend the following sections:		
Section 1	October 1, 2013	New section

KID *Joint Favorable Subst.*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 14 \$	FY 15 \$
Children & Families, Dept.	GF - Potential Cost	See Below	See Below
Developmental Services, Dept.	GF - Potential Cost	See Below	See Below

Municipal Impact: None

Explanation

The bill specifies that the Department of Children and Families (DCF) implement the provisions of the bill within available appropriations. However, if the bill were to be implemented, there would be a potential cost to DCF and to the Department of Developmental Services (DDS) beginning on 10/1/13 to the extent that additional or expanded Birth to Three referral screenings are performed by DCF, resulting in additional Birth to Three program evaluations and participants. The bill requires that DCF twice-annually screen (with screening meeting specified criteria) children 36 months of age or younger who (1) are substantiated as victims of abuse or neglect or (2) have been the subject of an assessment pursuant to the differential response system. The bill also requires DCF to refer any children not eligible for the Birth to Three program to the Help Me Grow prevention program, but as this is current agency practice it does not result in a fiscal impact to DCF or the Children's Trust Fund.

DCF currently screens children 36 months of age or younger who (1) are substantiated as victims of abuse or neglect or (2) have been the subject of an assessment pursuant to the differential response system for referral to the Birth to Three program. In compliance with federal

laws,¹ DCF and DDS developed a Memorandum of Understanding (MOU) in 2005 concerning DCF referrals to DDS. This MOU was revised in January 2013 to address DCF referrals to the Birth to Three program for this specific DCF population. Nonetheless, this MOU does not specify the scope of the referral screenings to be performed by DCF nor the required annual number of referral screenings. It is unknown if DCF screenings currently meet the criteria provided under the bill or if they occur twice annually. To the extent that expanded or additional screenings are performed, an additional cost of \$300 to \$500 to DCF would be incurred for each expanded or additional referral screening.

To the extent that these potential, additional or expanded DCF referrals to DDS result in additional Birth to Three program evaluations and services, costs would be incurred by DDS (\$351 per evaluation and \$8,436 per child, per year in the program). Currently, DCF refers 300 to 400 children to the DDS Birth to Three program annually. Approximately 90% of the children referred by DCF are evaluated by DDS for the Birth to Three program and 52% of those evaluated children go on to receive Birth to Three services.

The Out Years

The fiscal impact identified above would continue into the future subject to the extent that additional Birth to Three referral screenings are performed by DCF, resulting in a cost to DCF, and a cost to DDS should these additional referrals result in additional DDS Birth to Three program evaluations and/or participants.

¹The Federal Individuals with Disabilities Act (IDEA): Part C and the Federal Child Abuse Prevention and Treatment Act (CAPTA).

OLR Bill Analysis**sSB 652*****AN ACT CONCERNING REFERRALS FROM THE DEPARTMENT OF CHILDREN AND FAMILIES TO THE BIRTH-TO-THREE PROGRAM.*****SUMMARY:**

This bill requires the Department of Children and Families (DCF) to establish a program, within available appropriations, to address the developmental needs of children age three or younger who are substantiated abuse or neglect victims or have been the subject of an assessment under the differential response program (see BACKGROUND).

As part of the program, the bill requires DCF to screen such children twice annually for developmental and social-emotional delays through evidence-based assessments, including physical examinations, social and emotional evaluations, and questionnaires. The department must refer any child found, through the screening, to exhibit such delays to (1) the Birth-to-Three Program (see BACKGROUND) or if ineligible for the Birth-to-Three Program (2) the Children's Trust Fund's Help Me Grow prevention program (see BACKGROUND) or a similar appropriate program.

Starting by July 1, 2014, the bill requires DCF to begin submitting annual reports to the Children's Committee for inclusion in the committee's annual report card on state policies and programs affecting children. The report must include the:

1. number of Connecticut children age three or younger who are
 - (a) substantiated abuse or neglect victims and
 - (b) being served through the differential response program and

2. percentage of children (presumably in the state) (a) who received evidence-based assessments by a DCF-contracted provider during the previous year and (b) receiving evidence-based developmental support services through the birth-to-three program or through a DCF-contracted provider.

EFFECTIVE DATE: October 1, 2013

BACKGROUND

Differential Response Program

Through the differential response program, DCF can refer families to appropriate community providers for assessment and services, (1) at any time during an investigation in an abuse or neglect case or (2) when it decides not to investigate such a case that it classifies as presenting a lower risk. These referrals can occur only when there has been an initial safety assessment of the family's circumstances and criminal background checks have been performed on all adults involved in the report.

Birth-To-Three Program

The Birth-to-Three Program is designed to strengthen families' capacities to meet the developmental and health-related needs of their infants and toddlers who have developmental delays or disabilities. Eligible families work with service providers to develop Individualized Family Services Plans, with services starting within 45 days of the plan's completion. The plans are reviewed at least once every six months and rewritten at least annually.

The Department of Developmental Services is the state's lead agency for the Birth-to-Three Program, but families may get referrals from it to other state agencies' programs, depending on the number and type of disabilities a child has.

Children's Trust Fund's Help Me Grow Program

The Children's Trust Fund is a division of the Department of Social Services. Its Help Me Grow program helps parents and child health

and service providers access community based early identification, prevention, and intervention services for child developmental or behavioral problems through a toll-free number.

Related Bill

SB 832, reported favorably by the Children's Committee, changes the name of the differential response program to the family assessment program.

Children Committee

Joint Favorable Substitute

Yea 12 Nay 0 (03/12/2013)